



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 1899

SERIAL NUMBER 10/657,145	FILING OR 371(c) DATE 09/09/2003 RULE	CLASS 434	GROUP ART UNIT 3714	ATTORNEY DOCKET NO. IMMR023/04US
------------------------------------	-----------------------------------------------------------	---------------------	-------------------------------	--------------------------------------------

APPLICANTS

David Alexander, Purcellville, VA;
 J. Michael Brown, Washington, DC;
 Eric Cabahug, Fairfax, VA;
 Philip J. Churchill, Silver Spring, MD;
 Robert F. Cohen, Burtonsville, MD;
 Richard L. Cunningham, Arlington, VA;
 Ben Feldman, McLean, VA;

**** CONTINUING DATA *******

This application is a DIV of 09/237,969 01/27/1999
 which claims benefit of 60/072,672 01/28/1998
 and claims benefit of 60/105,661 10/26/1998
 and claims benefit of 60/116,545 01/21/1999

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 12/08/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY VA	SHEETS DRAWING 14	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

David B Ritchie
 Thelen Reid & Priest LLP
 P O Box 640640
 San Jose ,CA 95164-0640

TITLE

Interface device and method for interfacing instruments to medical procedure simulation systems

FILING FEE RECEIVED
786

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees (Filing)
<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
<input type="checkbox"/> 1.18 Fees (Issue)
<input type="checkbox"/> Other _____

	<input type="checkbox"/> Credit
--	---------------------------------